CAMPAIGN FINANCE REPORT LOCAL COMMITTEES OF WISCONSIN (CEC RECD*210715 PM12:13					
Is This Report an Amendment:	□ No		AT		
Instructions for completing schedules are on the back of each schedule.					
COMMITTEE IDENTIFICATION					
Name of Committee FRIENDS OF SUPERVISOR RICHARDH, BUSSLER Street Address 2207 No. 6545 ST. City, State and Zip Code OFFICE USE ONLY					
2207 No, 63 ²³ S7, City. State and Zip Code					
WAUNA TOSA WI 53213-2033					
Please check if address is different than previously reported, and	complete the Campaign Reg	istration Statement in the b	ack of this form.		
NAME OF REPORT					
January Continuing Pre-Primary July Continuing September Continuing Pre-Election	Spring I	Fall Special	Termination Report also complete Schedule 4		
SUMMARY OF RECEIPTS AND DISBURSEMENTS	Column A This Period	Column B Calendar			
1. RECEIPTS		Year-To-Date			
1A. Contributions (Including Loans) from Individuals	\$	\$			
1B. Contributions from Committees (Transfers-In)	\$	\$			
1C. Other Income and Commercial Loans	\$ /.81	\$			
TOTAL RECEIPTS (Add totals from 1A, 1B and 1C)	s 1.31	\$ [.81			
2. DISBURSEMENTS					
2A. Gross Expenditures	\$	\$			
2B. Contributions to Committees (Transfers-Out)	\$	\$			
TOTAL DISBURSEMENTS (Add totals from 2A and 2B)	\$	\$			
CASH SUMMARY					
Cash Balance Beginning of Report	1 19,168,64				
Total Receipts	\$ 181				
Subtotal	\$19,170.45				
Total Disbursements	\$				
CASH BALANCE END OF REPORT	\$ 19,170.46				
INCURRED OBLIGATIONS (Balance at the Close of This Period-3A)	\$				
LOANS (Balance at the Close of This Period-3B)	\$				
I certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.					

Type or Print Name of Candidate or Treasurer	Signature of Candidate of Treasurer Date: Date:
••	Signature of Candidate of Treasurer Duster Date: 7/12/2021
Diagona is Buckey	The state of the s
RICHARD H. BUSSLER	Email husslevel 1ck P. Q. word. COADaytime Phone 414-771-665-8

NOTE: The information on this form is required by ss. 11.0204, 11.0304, 11.0404, 11.0504, 11.0604, 11.0804, 11.0904, Wis. Stats. Failure to provide the information may subject you to the penalties of ss.11.1400, 11.1401, Wis. Stats.

ETHCF-2L (Rev. 01/16)

The Government Accountability Board prescribes this form. Completed forms must be filed with your local clerk.



RECEIPTS Other Income and Commercial Loans

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Complete Committee Name

FRIGHTS OF SUP PICLIARD H. TSUSSLER
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Date	Full Name, Mailing Address and Zip Code of Source of Income	Type of Income	Amount
1/3/21	FOCUS CREDIT UNION 1530 NI. 684 ST. WAUWATOSP, WI 53213	EARNED , WIGREST	1.81
1,00,000			
	\$1.81		
		TOTAL ITEMIZED OTHER INCOME	\$
		TOTAL OTHER INCOME	s 1.81

Logout

REGULAR CHECKIN

Amount: \$0.30

Balance: \$19,151.45

CAROLINO BRAND 17052100

Amount: \$0.31

Balance: \$19,151.15

Amount: \$0.30

Balance: \$19,150.84

Amount: \$0.31

Balance: \$19,150.54

Amount: \$0.28

Back

Logout

REGULAR CHECKIN

Amount: \$0.31

Balance: \$19,149.95

Amount: \$0.31

Balance: \$19,149.64

Amount: \$0.30

Balance: \$19,149.33

Amount: \$0.31

Balance: \$19,149.03

Amount: \$0.30